

UNITED STATES DISTRICT COURT DISTRICT OF MINNESOTA (Rev. 01/2017)			TRANSCRIPT ORDER <i>CJA counsel please complete an AUTH24 in CJA eVoucher</i> <i>Please read instructions on next page.</i>						COURT USE ONLY NOTES:			
1a. CONTACT PERSON FOR THIS ORDER Kristin M. Drieman			2a. CONTACT PHONE NUMBER 612-336-4703			3. CONTACT EMAIL ADDRESS kdrieman@merchantgould.com						
1b. ATTORNEY NAME (if different) Allen Hinderaker			2b. ATTORNEY PHONE NUMBER 612-371-5292			3. ATTORNEY EMAIL ADDRESS ahinderaker@merchantgould.com						
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Merchant & Gould P.C. 3200 IDS Center 80 S. Eighth Street Minneapolis, MN 55402				5. CASE NAME (Include defendant number, for criminal cases only) Fair Isaac Corp. v. Federal Insurance Company				6. CASE NUMBER 16-cv-1054 (WMW/DTS)				
7. COURT REPORTER NAME, if applicable Audio Recording				8. THIS TRANSCRIPT ORDER IS FOR (CHECK ALL THAT APPLY): CJA: <u>Do not use this form; use AUTH24</u> in CJA.								
				<input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for TRANSCRIPTS must be attached) <input checked="" type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL <input type="checkbox"/> Standing Order (MDL only)								
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:												
a. HEARING(S) (OR PORTIONS OF HEARINGS)			b. SELECT FORMAT(S) <i>NOTE: ECF access is included.</i>				c. DELIVERY TYPE <i>Delivery times are not guaranteed.</i>					
DATE	JUDGE (initials)	PORTION <small>If requesting less than full hearing, specify portion (e.g. witness or time)</small>	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	DAILY (Next day)	HOURLY (2 hrs)	REALTIME (rough draft)
02/14/2018	DTS		X	X			X					
10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:												
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).										12. DATE 02/16/2018		
11. SIGNATURE s/Allen Hinderaker												